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APPLICANTS

Timothy Kershenstine JR., Metairie, LA;

**** CONTINUING DATA ******* *mc7*
 This appln claims benefit of 60/418,531 10/15/2002

**** FOREIGN APPLICATIONS ******* *mc7*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 01/14/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY LA	SHEETS DRAWING 0	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 6
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35 USC 119 (a-d) conditions met
☐ yes ☒ no ☐ Met after Allowance

Verified and Acknowledged
mc7 Examiner's Signature *mc7* Initials

ADDRESS
 27257
 THOMAS S. KEATY
 KEATY PROFESSIONAL LAW CORP.
 2140 WORLD TRADE CENTER
 NO. 2 CANAL STREET
 NEW ORLEANS , LA
 70130

TITLE
 Herbal dietary supplement

FILING FEE RECEIVED 514	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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